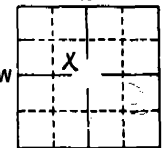


STATE OF IDAHO  
DEPARTMENT OF WATER RESOURCES  
**WELL DRILLER'S REPORT**USE TYPEWRITER OR  
BALLPOINT PENState law requires that this report be filed with the Director, Department of Water Resources  
within 30 days after the completion or abandonment of the well.

<b>1. WELL OWNER</b> Name <u>South River Water Assn</u> Address <u>12102 4th Post Falls</u> Drilling Permit No. <u>95-91-N-22</u> Water Right Permit No. <u>95-8684</u>		<b>7. WATER LEVEL</b> Static water level <u>-40</u> feet below land surface. Flowing? <input type="checkbox"/> Yes <input type="checkbox"/> No G.P.M. flow <u>air lift 80+</u> Artesian closed-in pressure _____ p.s.i. Controlled by: <input type="checkbox"/> Valve <input type="checkbox"/> Cap <input type="checkbox"/> Plug Temperature _____ of. Quality _____ Describe artesian or temperature zones below.																																																																							
<b>2. NATURE OF WORK</b> <input checked="" type="checkbox"/> New well <input type="checkbox"/> Deepened <input type="checkbox"/> Replacement <input type="checkbox"/> Well diameter increase <input type="checkbox"/> Abandoned (describe abandonment procedures such as materials, plug depths, etc. in lithologic log)		<b>8. WELL TEST DATA</b> <input type="checkbox"/> Pump <input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Air <input type="checkbox"/> Other _____ Discharge G.P.M. _____ Pumping Level _____ Hours Pumped _____ <u>air lift 80+</u> _____ <u>3</u>																																																																							
<b>3. PROPOSED USE</b> <input type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Test <input checked="" type="checkbox"/> Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/> Waste Disposal or Injection <input type="checkbox"/> Other _____ (specify type)		<b>9. LITHOLOGIC LOG</b> <table border="1"><thead><tr><th rowspan="2">Bore Diam.</th><th colspan="2">Depth</th><th rowspan="2">Material</th><th colspan="2">Water</th></tr><tr><th>From</th><th>To</th><th>Yes</th><th>No</th></tr></thead><tbody><tr><td>10"</td><td>0</td><td>17</td><td>Brown Dirt</td><td></td><td>X</td></tr><tr><td>10"</td><td>7</td><td>19</td><td>Black-white quartzite 1-2 gpm</td><td>X</td><td></td></tr><tr><td>8"</td><td>19</td><td>90</td><td>Black quartzite Hard</td><td></td><td>X</td></tr><tr><td>5"</td><td>90</td><td>160</td><td>Green quartzite Soft med</td><td></td><td></td></tr><tr><td>8"</td><td>160</td><td>305</td><td>Black-white quartzite Med</td><td></td><td></td></tr><tr><td>8"</td><td>305</td><td>390</td><td>Green</td><td></td><td></td></tr><tr><td>8"</td><td>390</td><td>395</td><td>Green-white soft quartzite</td><td>X</td><td></td></tr><tr><td>8"</td><td>395</td><td>410</td><td>Black-white quartzite Med</td><td></td><td></td></tr><tr><td>8"</td><td>410</td><td>415</td><td>Green-white quartzite Soft</td><td></td><td>X</td></tr><tr><td>8"</td><td>415</td><td>420</td><td>Green quartzite med</td><td></td><td></td></tr></tbody></table>		Bore Diam.	Depth		Material	Water		From	To	Yes	No	10"	0	17	Brown Dirt		X	10"	7	19	Black-white quartzite 1-2 gpm	X		8"	19	90	Black quartzite Hard		X	5"	90	160	Green quartzite Soft med			8"	160	305	Black-white quartzite Med			8"	305	390	Green			8"	390	395	Green-white soft quartzite	X		8"	395	410	Black-white quartzite Med			8"	410	415	Green-white quartzite Soft		X	8"	415	420	Green quartzite med		
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<b>4. METHOD DRILLED</b> <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Air <input type="checkbox"/> Hydraulic <input type="checkbox"/> Reverse rotary <input type="checkbox"/> Cable <input type="checkbox"/> Dug <input type="checkbox"/> Other _____		<b>10.</b> Work started <u>3-4-91</u> finished <u>5-8-91</u>																																																																							
<b>5. WELL CONSTRUCTION</b> Casing schedule: <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other <u>PVC</u> Thickness _____ inches Diameter _____ inches From _____ feet To _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet _____ inches _____ inches _____ feet _____ feet Was casing drive shoe used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Was a packer or seal used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Perforated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No How perforated? <input type="checkbox"/> Factory <input type="checkbox"/> Knife <input type="checkbox"/> Torch <input type="checkbox"/> Gun Size of perforation _____ inches by _____ inches Number _____ From _____ To _____ _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet _____ perforations _____ feet _____ feet Well screen installed? <input type="checkbox"/> Yes <input type="checkbox"/> No Manufacturer's name _____ Type _____ Model No. _____ Diameter _____ Slot size _____ Set from _____ feet to _____ feet Diameter _____ Slot size _____ Set from _____ feet to _____ feet Gravel packed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Size of gravel _____ Placed from _____ feet to _____ feet Surface seal depth <u>18</u> Material used in seal: <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Pudding clay <input type="checkbox"/> _____ Sealing procedure used: <input type="checkbox"/> Slurry pit <input type="checkbox"/> Temp. surface casing <input type="checkbox"/> Overbore to seal depth Method of joining casing: <input type="checkbox"/> Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Solvent Weld _____ <input type="checkbox"/> Cemented between strata Describe access port _____		<b>11. DRILLERS CERTIFICATION</b> <u>SP</u> I/We certify that all minimum well construction standards were complied with at the time the rig was removed. Firm Name <u>H2O Well Service</u> Firm No. <u>448</u> Address <u>Hayden Idaho</u> Date <u>3-11-91</u> Signed by (Firm Official) <u>John Verheuen</u> and (Operator) <u>John Verheuen</u>																																																																							
<b>6. LOCATION OF WELL</b> Sketch map location must agree with written location.  County <u>Boise</u> <u>Se 1/4 NW 1/4 Sec. 10, T. 50 N. R. 5 W.</u>		<b>12. RECEIVED</b> APR 12 1991 Department of Water Resources <b>RECEIVED</b> APR 05 1991 NORTHERN REGION IDWR																																																																							